OR    MUMBER FILED   NUMBER EXTRA	CLAIMS AS FILED - PART I  (Column 1) (Column 2)  OTAL CLAIMS  OR NUMBER FILED NUMBER EXTRA  OTAL CHARGEABLE CLAIMS  OTAL	or C	or Docket	Number
TOTAL CLAIMS  COUNTY 1 (Column 2)  COUNTY 1 (Column 2)  COUNTY 1 (Column 3)  COUNTY 1 (Column	TOTAL CLAIMS  COIL MARGER FILED  NUMBER EXTRA  TOTAL CHARGEABLE CLAIMS  MINUS 20 2 2 2 2 2 2 3 3 3 3 4 42 2 4 1 4 0	19	980	
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TOTAL CHARGEABLE CLAIMS    Minus 3 =   3	MULTIPLE DEPENDENT CLAIMS  MULTIPLE DEPENDENT CLAIM PRESENT  If the difference in column 1 is less than zero, enter "0" in column 2  3/3/3/ GLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS  REMAINING  AFTER  AMENDMENT  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS  RANING  RANING  RAPIER  AMENDMENT  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS  RANING  RAPIER  AMENDMENT  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS  REMAINING  AFTER  AMENDMENT  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS  REMAINING  AFTER  AMENDMENT  AMENDMENT  FRATE  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS  REMAINING  AFTER  AMENDMENT  AFTER  AMENDMENT  AFTER  AMENDMENT  AFTER  AMENDMENT  AFTER  AMENDMENT  AMENDME	OF	OR BASIC	FEE 750.00
MULTIPLE DEPENDENT CLAIMS minus 3 = 3  MULTIPLE DEPENDENT CLAIM PRESENT  If the difference in column 1 is less than zero, enter "0" in column 2  TOTAL OR TOTAL  ADDITIONAL  FEE  X\$ 9= OR X\$18=  OR X\$4=  Independent Indep	MULTIPLE DEPENDENT CLAIM PRESENT  If the difference in column 1 is less than zero, enter "0" in column 2  A22  140  Claims AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  HIGHEST PREVIOUSLY PRESENT PREVIOUSLY PRESENT PREVIOUSLY PAID FOR PRESENT FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PREVIOUSLY PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CLAIMS REMAINING AFTER AMENDMENT AMENDMENT PREVIOUSLY PRESENT AMENDMENT PREVIOUSLY PRESENT AMENDMENT TOTAL ADDIT. FEE  COLUMN 1)  CLAIMS REMAINING AFTER AMENDMENT AMENDMENT AMENDMENT TOTAL ADDIT. FEE  COLUMN 1)  CLAIMS REMAINING AFTER PREVIOUSLY PRESENT AMENDMENT AMENDMENT AMENDMENT AMENDMENT PREVIOUSLY PRESENT AMENDMENT	OF	OR X\$18	8.5
### HIGHEST PRESENTATION OF MULTIPLE DEPENDENT CLAIM    Column 1	Total	7		=
If the difference in column 1 is less than zero, enter "0" in column 2    Column 1   Column 2   Column 3	If the difference in column 1 is less than zero, enter "0" in column 2  3/3/3/5/ SLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 5)  (Column 5)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 8)  (Column 1)  (Column 9)  (Column 1)  (Column 3)  (Column 4)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 3)  (Column 4)  (Column 5)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 9)  (Column 9)  (Column 9)  (Column 1)  (Column 2)  (Column 1)  (Col		~~ <del> </del>	-+
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Column 1   Column 2   Column 3	Column 1   Column 2   Column 3		RATE	E TIONAL
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+140= OR +280= OR   +280= OR   TOTAL   ADDIT. PEE   OR   ADDIT.	(Column 1) (Column 2) (Column 3)  CLAMS REMAINING AFTER AMENDMENT  Total  Independent  Minus  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  If the entry in column 1 is less than the entry in column 2, write °0' in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter *20.  ADDITATIONAL FEE  **  **  **  **  **  **  **  **  **	OR	R X84	3
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